Complete and s	end this f	orm, toge	ther wit		e fee(s), to: <u>Mail</u>	M Co P.o Al	ail Stop ISSUE ommissioner for O. Box 1450 exandria, Virgi	r Pate	•		
)(y /i	is form sho	ld he nsed	for transm	nitting the ISS	•		71)-273-2885	md) IDI	logica I shaw it 6 at		
INSTRUCTIONS/The appropriate. At further indicated, will be correctly in the correct that the correct the correct that the co	r correspond cted below o	ence includi directed of	ng the Pa berwise in	tent, advance of Block 1, by (rders and notification a) specifying a new	n of	maintenance fees w espondence address;	and/or	pailed to the current (b) indicating a sepa	correspo rate "FE	ndence address a E ADDRESS" fo
CURRENT CORRESPON	-au,	<u> </u>				No	to: A corrificate of	mailing	one only he wood fo		22 — 21
						par	pers. Each additional ve its own certificate	of mail	cate cannot be used for such as an assignment of transmission.	ot or for	net accombanation
AGILENT TI	7590 = (**EDNIC) T	:	1/2007 NTC				Cert	tificate (of Mailing or Trans	mission	
INTELLECTU				TRATION,I	EGAL DEPT.	Sta	ereby certify that thi	is Fee(s) ith suff	Transmittal is being ictent postage for firs SSUE FEE address) 273-2885, on the de	deposite t class m	al with the United ail in an envelope
MS BLDG. E I LOVELAND,	P.O. BOX	7599		•		tran	asmitted to the USPI	rO (571	330E PEE address) 273-2885, on the di	ne indica	ir being incomile and below.
LOVELAND,	CO 8033/					L	John F-Bra	dy			(Depositor's name)
:					• •	\vdash	Son 1	<u>~ £</u>	rady		(S)guamre)
						L	· 6.	18	07		(Dete)
APPLICATION NO.	1	ILING DATE			FIRST NAMED INVE	NTOI	R	ATTOR	NEY DOCKET NO.	CONFI	RMATION NO.
10/788,547 TITLE OF INVENTIO	N: SCANNE	02/27/2004 R WITH AR	RAY AN	TI-DEGRADA	John F. Corson TION FEATURES			. 1	i0031000-1	•	7082
APPLN. TYPE	T				T		- 		•		•
nonprovisional		ENTITY ;	<u> </u>	\$1400	PUBLICATION FEE	DUE		FEE	TOTAL FEE(S) DUE	1.	DATE DUE
		,			\$300		\$0		\$1700	1	06/25/2007
EXAMINER TURK, NEIL N			A	1743	CLASS-SUBCLAS	S	J		•		
1. Change of correspond		s or indicatio	n of Tee		436-164000	thar	nations from many E-				
CFR 1.363). Change of corres Address form PTO/S		,		• • •	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						<u> </u>
Tee Address" in PTO/SB/47; Rev 03- Number is required	dication (or '	Fee Address recent) attack	" Indication of Use of	on form f a Customer	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME	AND RESID	ENCE DAT	A TO BE	PRINTED ON	THE PATENT (print	or ty	pe)			•	
PLEASE NOTE: Un recordation as set for	nless an assi rth in 37 CFF	nee is ident 3.11. Com	ified belowed	w, no assignee this form is NO	data will appear on t I a substitute for filin	the p	atent. If an assigne	e is íde	ntified below, the do	cument l	nas been filed for
(A) NAME OF ASS	IGNEE .				(B) RESIDENCE: (CITY	and STATE OR CO	DUNTR	Y) .		
Agilent	Techno	logies,	Inc.		Sánta	Clá	ara, CA			•	
Please check the approp	riate assigne	category or	categorie	s (will not be pr	inted on the patent) :		Individual XX Cor	moratina	n or other neivate	un entitu	П с
4a. The following fee(8)		:			*						
X Issue Fee	!			Payment of Fee(s): A check is enclosed.	sed.				DOWID AD	ůvě) ·	
Nublication Fee () Advance Order	ty discount p	ermitted)	• •	Payment by cred	it car	card. Form PTO-2038 is attached. eby authorized to charge the required fee(s), any deficiency, or credit any eposit Account Number $50-1078$ (enclose an extra copy of this form).					
	•			· · · · · · · · · · · · · · · · · · ·	overpayment, to	Debo	wit Account Number	50-1	Direct tee(s), any defi D78 (enclose an	extra co	or credit any by of this form).
 Change in Entity State a. Applicant claim 				CFR 1 27	h Applicant is a	a lone	one eleimine SASATI		TY status. See 37 CF		
NOTE: The Issue Fee ar	d Publicatio	n Fee (if ren	riped) will	not be prompted	1 from omious -4b41	paù t	he applicant; a regist	ered att	orney or agent; or the	assigner	or other party in
:		1	es racent	and Hanemark	Office.			-			
Authorized Signature		1		Greeky			Date	-/8	4-07		· <u>.</u>
Typed or printed nam	7				<u>:</u>	•	Registration No.		9.118		·
This collection of inform an application. Confiden	ation is required to the state of the state	ired by 37 C	FR 1.311, U.S.C. 12	The information 2 and 37 CFR	n is required to obtain	or n	etain a benefit by the	public	which is to file (and	by the US	SPTO to process)
This collection of informan application. Confidents submitting the complete this form and/or suggest Box 1450, Alexandra, Virginia 223	a application ions for redu	torm to the	USPTO.	Time will vary	depending upon the i	ndiv ffice	idual case. Any com r, U.S. Patent and To	inents o	n the amount of time k Office, U.S. Depar	you reg	pure to complete Commerce. P.O.
Alexandría, Virginia 223	13-1450.	C100=	inor ser	NU FEES OR C	OMPLETED FORM	s IC	THIS ADDRESS.	SEND]	TO: Commissioner fo	z Patents	. P.O. Box 1450,
Under the Paperwork Re	Auction Act	מת, כעצו זק	ersons are	required to res	pond to a collection o	f info	ormation unless it dis	splays a	valid OMB control n	umber.	
					,				:		

*PAGE 1/1 * RCVD AT 6/18/2007 1:33:44 PM [Eastern Daylight Time] * SVR: USPTO-EFXRF-6/12 * DNIS:2732885 * CSID: 4085532365 * DURATION (mm-ss):00-44 of COMMERCE